Manitoba

Annual Report 1999 - 2000

Children and Youth Secretariat

Includes 10% post-consumer waste

Manitoba

Family Services and Housing Healthy Child Initiative

September 2000

His Honour Peter Liba
Lieutenant-Governor
Province of Manitoba

May It Please Your Honour:

I have the pleasure of presenting herewith the Annual Report of the Children and Youth Secretariat for the fiscal year ending March 31, 2000.

Respectfully submitted,

Tim Sale

Manitoba

100-07637/

Family Services and Housing Healthy Child Initiative

September 2000

Tim Sale
Minister of Family Services and Housing
357 Legislative Building

Sir:

I have the honour of presenting to you the Annual Report of the Children and Youth Secretariat for the fiscal year ending March 31, 2000.

Respectfully submitted,

Tannis Mindell

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Introduction

The Annual Report for the Children and Youth Secretariat is submitted in accordance with requirements set out in *The Financial Administration Act*. The report is organized to provide financial information at the sub-appropriation level for the fiscal year ending March 31, 2000. Comparisons of actual expenditures with planned expenditures, and a historical comparison table of Expenditures and Staffing by Appropriation, have also been provided.

Organization, Staffing and Reporting Structure

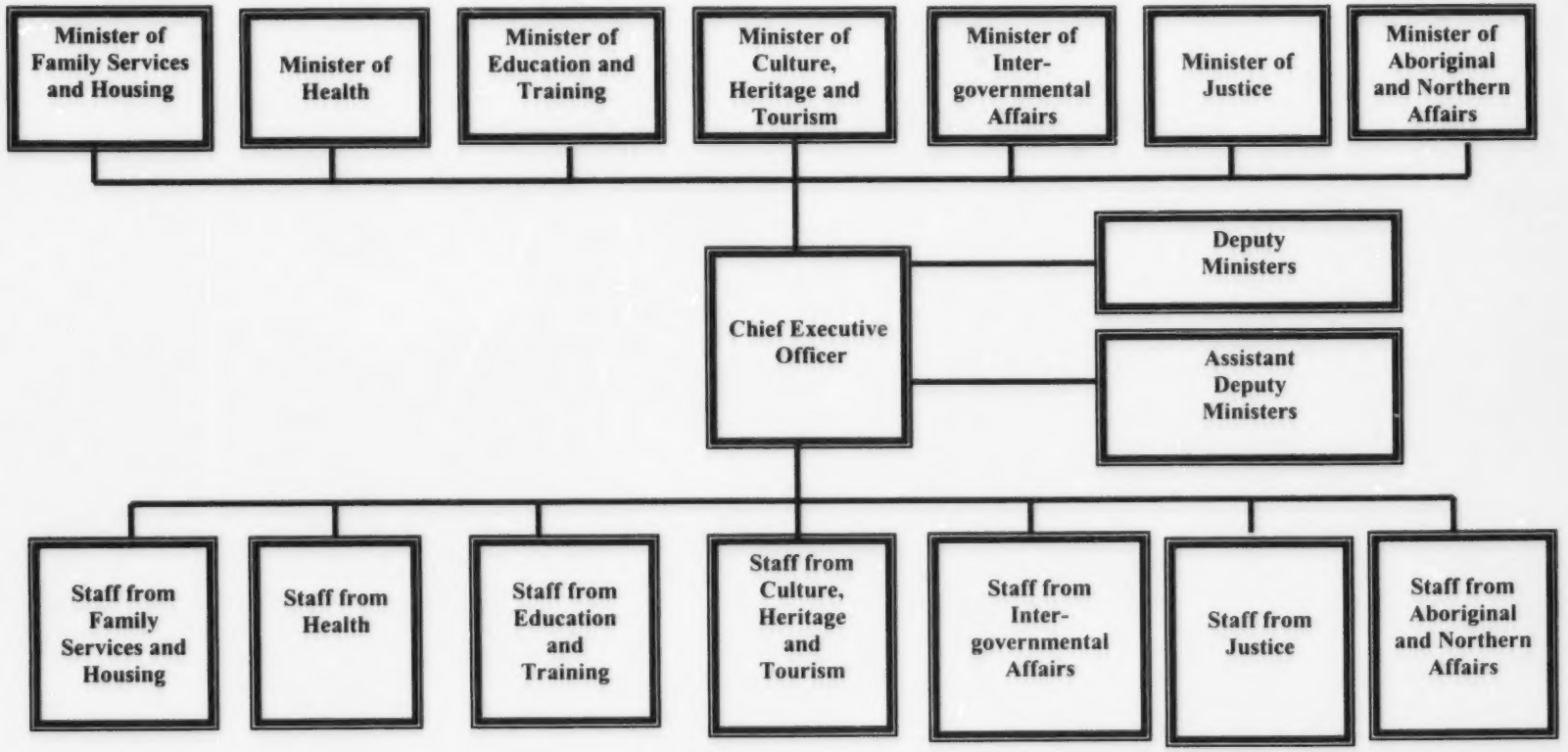
The Children and Youth Secretariat was established as a full secondment-staffed model. Predominantly, staff years and all incumbents represented existing resources of the partner departments – Health, Family Services and Housing, Justice, Education and Training, Culture, Heritage and Tourism, Aboriginal and Northern Affairs, and Intergovernmental Affairs.

The Secretariat reported to the Human Services Committee of Cabinet through the lead Minister (Family Services and Housing). To facilitate the work of the Secretariat, an Assistant Deputy Ministers' Group and a Deputy Ministers' Steering Committee met regularly.

On March 28, 2000, the Healthy Child Initiative was created. The Healthy Child Initiative is directed by a Committee of Cabinet comprised of Ministers from the departments of Aboriginal and Northern Affairs, Education and Training, Health, Justice, and chaired by the Minister of Family Services and Housing. The Healthy Child Initiative focuses on parent-child centres, prenatal and early childhood programs, nurses in schools, adolescent pregnancy prevention, and fetal alcohol syndrome/fetal alcohol effect prevention.

CHILDREN AND YOUTH SECRETARIAT

Organization Chart


Minister of Family Services and Housing
Minister of Health
Minister of Education and Training
Minister of Culture, Heritage and Tourism
Minister of Inter-governmental Affairs
Minister of Justice
Minister of Aboriginal and Northern Affairs
Chief Executive Officer
Deputy Ministers
Assistant Deputy Ministers
Staff from Family Services and Housing
Staff from Health
Staff from Education and Training
Staff from Culture, Heritage and Tourism
Staff from Inter-governmental Affairs
Staff from Justice
Staff from Aboriginal and Northern Affairs

Role and Mission

The Children and Youth Secretariat acted as a central co-ordinating body and delivery unit to provide leadership and direction for services to Manitoba children, youth and families. The vision of the Children and Youth Secretariat was to achieve the best possible outcomes for all of Manitoba's children. The mission of the Secretariat was to provide a leadership role to ensure that Manitoba children develop into healthy and successful adults.

Goals

1. Improved co-ordination of services to ensure best outcomes for Manitoba children, youth and families;
2. "Best practices" for healthy outcomes are researched and adapted to Manitoba environment and needs;
3. Shared responsibility for the healthy development of children, youth and families;
4. Facilitate best outcomes for Aboriginal children, youth, and families; and
5. Successful early years of a child's life.

Goal 1: Improved coordination of services to ensure best outcomes for Manitoba children, youth, and families

- The Secretariat provided forums for intersectoral planning among partner departments regarding programs and services for high risk children, youth, and families. Examples include the regular meetings of partner department Deputy Ministers, an Assistant Deputy Ministers' Committee, and the establishment of topic-specific inter-departmental Working Groups.
- In addition, opportunities were provided for consultation from a broad range of community partners on issues affecting high needs children, youth, and families. Examples include a partnered survey on Fetal Alcohol Syndrome (FAS), the establishment of youth urban and northern councils to advise on adolescent pregnancy, and a partnered consultation on a research Centre of Excellence for Manitoba.
- The Secretariat worked to procure financial, technical, and "in kind" contributions from government, private, and corporate partners.

Goal 2: "Best practices" for healthy outcomes are researched and adapted to Manitoba environment and needs

- The Secretariat participated in federal/provincial/territorial initiatives concerning children and youth. Examples include the National Children's Agenda and the National Child Benefit.
- Inter-sectoral strategies were developed regarding major issues affecting the well-being of children, youth, and families. Examples include a provincial strategy regarding adolescence and pregnancy, and a provincial strategy regarding FAS/FAE.

- Inter-departmental protocols were established to focus the efforts of relevent departments and service providers to provide integrated and co-ordinated planning and service delivery to high risk children and families. Examples include protocols regarding school entry for special needs children and placement of children in substitute care outside their home school division.

- Research into innovative and effective solutions to issues affecting children, youth, and families was an ongoing priority.

- The Secretariat worked with other jurisdictions to identify effective interventions for high risk groups. An example includes the Prairie Partnership on Fetal Alcohol Syndrome.

- "Best practice" pilots were developed and implemented. Examples include rural and urban BabyFirst and Early Start research sites, two Stop FAS research sites, a rural and an urban full service school research sites partnered with the Department of Education and Training.

- Pilots were evaluated and results used to design Manitoba "best practice" models.

Goal 3: Shared responsibility for the healthy development of children, youth, and families

- Fetal alcohol strategies were implemented through community health structures. The Community-Based Initiatives Grant for the Prevention of FAS/FAE Program supported communities in FAS awareness and education, intervention with women at risk of delivering children affected by FAS, and other initiatives that supported proactive solutions to preventing FAS.

- Thirty-seven mothers were enrolled in the Stop FAS program, which worked directly with women at risk of delivering a child affected by FAS to prevent future FAS births.

- An FAS conference held in Winnipeg saw Manitoba, Saskatchewan and Alberta discussing accomplishments made in the first year of a tri-province partnership to fight FAS.

- A Tele-Diagnostic link between Children's Hospital and Thompson was established to facilitate access for professionals to provide diagnosis and follow-up services to children and families affected by FAS.

- A public awareness campaign included public service announcements, brochures, posters and tapes to help people understand the causes and effects of FAS. Audiotapes and manuals for teachers and early childhood educators were prepared and distributed.

- Neighbourhoods and communities were assisted to develop strategies to address community priorities regarding high risk children, youth, and families. Examples include Norway House FAS strategy, youth councils to address adolescent pregnancy, and the Boys and Girls Club initiative.

- Strategies to decrease adolescent pregnancy were implemented through Regional Health Authorities, Manitoba Association of School Trustees (MAST), and other community structures. Baby Think It Over Dolls were used through a partnership with the Manitoba Home Economist Teachers' Association in Family Studies classes. Dolls were also distributed to northern nursing stations for the communities' use. The MAST media Adolescent Pregnancy Education Committee developed a focused campaign designed to prevent adolescent pregnancy and therapeutic intervention and research into the contributing factors of adolescent pregnancy were examined by the Youville Program, Healthy Choices.

- The Youville Program, Healthy Choices, involves both therapeutic intervention and research into the contributing factors of adolescent pregnancy.

Goal 4: Facilitate best outcomes for Manitoba Aboriginal children, youth, and families

- The Secretariat participated in initiatives such as the Urban Aboriginal Strategy.
- The participation of Aboriginal representation in national, provincial, and local forums was supported.
- Specific mechanisms to solicit the participation of Aboriginal youth were developed. The Northern and Urban Youth Councils co-ordinated through Ma Mow We Tak (Thompson) and Aboriginal Youth with Initiative Inc. (Winnipeg) co-ordinated the design of culturally appropriate adolescent pregnancy strategies.
- Aboriginal cultural sensitivity information was included in the preparation and training of BabyFirst and Early Start home visitor programs.
- The recruitment of Aboriginal staffing for all programs which serve significant numbers of Aboriginal children, youth, and/or families was encouraged.

Goal 5: Successful early years of a child's life

- The BabyFirst program was implemented across Manitoba. Public health nurses and home visitors were hired and trained to begin program delivery in late 1998 to early 1999. Through the BabyFirst program, every child born in Manitoba (about 14,000 children per year) will be assessed at birth by Public Health nurses to determine if the family will benefit from extra supports to raise the child successfully. More than 1,000 Manitoba families will be helped each year by providing early intervention and support to ensure their children grow up strong and healthy.
- The Early Start program was expanded and is now offered through 35 licensed child care centres and family day care homes throughout the province. The program provides a home visiting component for children 2-5 years of age, as home visitors focus on strengthening parenting skills, helping families access community resources, and preparing children for school entry.
- The Secretariat worked in partnership with the Manitoba Metis Federation to develop the "I Am Your Father" program, to assist young fathers to be more effective, responsible parents.

Appropriation 34: Children and Youth Secretariat

Expenditure Summary for Fiscal Year ended March 31, 2000 with Comparative Figures for the Previous Fiscal Year

Expenditure by Main Appropriation	Actual 1999/00 $	Estimate 1999/00		Variance	Expl. No.
		SY	$		
34-1 Salaries	362.1	6.00	337.7	24.4	1
34-1 Other Expenditures	282.0		348.1	(66.1)	2
34-2 Children First Initiatives	5,349.5		5,388.0	(38.5)	
34-3 Amortization	35.3		37.0	(1.7)	
Total Appropriations	**6,028.9**		**6,110.8**	**(81.9)**	

1. Over expenditure due primarily to additional staffing needs due to National Children's Agenda.
2. Under expenditure due primarily to lower than anticipated expenditures for publications.

Five-Year Expenditure and Staffing Summary by Appropriation ($000) for Fiscal Years Ending March 31, 1996 - March 31, 2000

Actual Expenditures										
Appropriation	1995/96		1996/97		1997/98		1998/99		1999/00	
	SY	$	SY	$	SY	$	SY	$	SY	$
Children & Youth Secretariat	-	43.7	-	129.2	1.00	727.8	2.00	2,333.8	6.00	6,028.9
Total	**-**	**43.7**	**-**	**129.2**	**1.00**	**727.8**	**2.00**	**2,333.8**	**6.00**	**6,028.9**